

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

The Northwestern Mutual Life Insurance Company Federal PAC

ADDRESS (number and street) ▼

720 E Wisconsin Ave

☐ Check if different than previously reported. (ACC)

Milwaukee

WI

53202

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00197095

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michelle A. Hinze

Signature of Treasurer

Michelle A. Hinze

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
04 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">175135.90</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">109194.71</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">31374.96</span>	<span style="border: 1px solid black; padding: 2px;">125678.65</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">140569.67</span>	<span style="border: 1px solid black; padding: 2px;">300814.55</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">27750.12</span>	<span style="border: 1px solid black; padding: 2px;">187995.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">112819.55</span>	<span style="border: 1px solid black; padding: 2px;">112819.55</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

The Northwestern Mutual Life Insurance Company Federal PAC

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2012

To:

 M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

24630.00

82982.67

(ii) Unitemized .....

6744.09

42691.94

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

31374.09

125674.61

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

31374.09

125674.61

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.87

4.04

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

31374.96

125678.65

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

31374.96

125678.65

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	250.12	995.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	250.12	995.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	27500.00	175500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	11500.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	27750.12	187995.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	27750.12	187995.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	31374.09	125674.61
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31374.09	125674.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	250.12	995.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	250.12	995.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. Douglas P. Bates**

Mailing Address 5413 Mount Corcoran PI

City State Zip Code  
 Burke VA 22015-2188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Federal Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-540**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**B. Douglas P. Bates**

Mailing Address 5413 Mount Corcoran PI

City State Zip Code  
 Burke VA 22015-2188

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Federal Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-537**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**C. Blaise C. Beaulier**

Mailing Address 23300 Dover Line Rd

City State Zip Code  
 Waterford WI 53185-4908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP IS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-947**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Blaise C. Beaulier**

Mailing Address 23300 Dover Line Rd

City State Zip Code  
 Waterford WI 53185-4908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP IS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-943**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Mitchell C. Beer**

Mailing Address 3387 Hampton Ct

City State Zip Code  
 Thousand Oaks CA 91362-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-41**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**c. Mitchell C. Beer**

Mailing Address 3387 Hampton Ct

City State Zip Code  
 Thousand Oaks CA 91362-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-41**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. J. Philip Bender**

Mailing Address 116 Belden Hill Rd

City State Zip Code  
Wilton CT 06897-2911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-44**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. J. Philip Bender**

Mailing Address 116 Belden Hill Rd

City State Zip Code  
Wilton CT 06897-2911

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-44**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. Beth M. Berger**

Mailing Address 4141 N Murray Ave

City State Zip Code  
Shorewood WI 53211-2011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

Ast Gn Cnl & Ast Sec/Secur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-536**

Amount of Each Receipt this Period

32.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

132.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Beth M. Berger**

Mailing Address 4141 N Murray Ave

City

Shorewood

State

WI

Zip Code

53211-2011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Ast Gn Cnl & Ast Sec/Secur

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-533**

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**B. Dwaan C. Black**

Mailing Address 3520 Dumbarton Rd NW

City

Atlanta

State

GA

Zip Code

30327-2614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-36**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Dwaan C. Black**

Mailing Address 3520 Dumbarton Rd NW

City

Atlanta

State

GA

Zip Code

30327-2614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-36**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

116.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

## **A. Debra Blevons**

Mailing Address 165 Pine Ct

City

Appleton

State

WI

Zip Code

54914-8222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-71

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

## **B. Debra Blevons**

Mailing Address 165 Pine Ct

City

Appleton

State

WI

Zip Code

54914-8222

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-71

Amount of Each Receipt this Period

62.50

Full Name (Last, First, Middle Initial)

## **C. Timothy John Bohannon**

Mailing Address 8677 Alvarado Ct

City

Inver Grove

State

MN

Zip Code

55077-3121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-17

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

333.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy John Bohannon**

Mailing Address 8677 Alvarado Ct

City

Inver Grove

State

MN

Zip Code

55077-3121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-17**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Sandra L. Botcher**

Mailing Address 15375 Kata Dr

City

Elm Grove

State

WI

Zip Code

53122-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Disability Income

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-820**

Amount of Each Receipt this Period

66.00

Full Name (Last, First, Middle Initial)

**C. Sandra L. Botcher**

Mailing Address 15375 Kata Dr

City

Elm Grove

State

WI

Zip Code

53122-1028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Disability Income

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-817**

Amount of Each Receipt this Period

66.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

340.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jennifer L. Brase**

Mailing Address 12877 N Cobblestone Ct

City

Mequon

State

WI

Zip Code

53097-1812

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Div & Inclusion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-854**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**B. Jennifer L. Brase**

Mailing Address 12877 N Cobblestone Ct

City

Mequon

State

WI

Zip Code

53097-1812

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Div & Inclusion

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-850**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Michael T. Byrne**

Mailing Address 395 La Casa Via

City

Walnut Creek

State

CA

Zip Code

94598-4842

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-34**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

185.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Michael T. Byrne**

Mailing Address 395 La Casa Via

City

Walnut Creek

State

CA

Zip Code

94598-4842

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-34**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Michael G. Carter**

Mailing Address 7322 N Mohawk Rd

City

Fox Point

State

WI

Zip Code

53217-3454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-952**

Amount of Each Receipt this Period

88.00

Full Name (Last, First, Middle Initial)

**c. Michael G. Carter**

Mailing Address 7322 N Mohawk Rd

City

Fox Point

State

WI

Zip Code

53217-3454

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & CFO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

704.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-948**

Amount of Each Receipt this Period

88.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

301.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Greg Castronovo**

Mailing Address 317 Evening Star Ln

City

Bozeman

State

MT

Zip Code

59715-7738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-51**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Greg Castronovo**

Mailing Address 317 Evening Star Ln

City

Bozeman

State

MT

Zip Code

59715-7738

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-51**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Scott G. Christensen**

Mailing Address 12 High Meadow Ln

City

Amherst

State

NH

Zip Code

03031-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-50**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

209.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 15 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Scott G. Christensen**

Mailing Address 12 High Meadow Ln

City State Zip Code  
Amherst NH 03031-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-50**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Eric P. Christophersen**

Mailing Address N55W21701 Adamdale Dr

City State Zip Code  
Menomonee Falls WI 53051-6272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Pres & CEO Wealth Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-683**

Amount of Each Receipt this Period

69.00

Full Name (Last, First, Middle Initial)

**C. Eric P. Christophersen**

Mailing Address N55W21701 Adamdale Dr

City State Zip Code  
Menomonee Falls WI 53051-6272

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Pres & CEO Wealth Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

552.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-680**

Amount of Each Receipt this Period

69.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

263.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. David D. Clark**

Mailing Address 923 E Kilbourn Ave

City Milwaukee State WI Zip Code 53202-3493

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

Svp Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-656**

Amount of Each Receipt this Period

141.00

Full Name (Last, First, Middle Initial)

**B. David D. Clark**

Mailing Address 923 E Kilbourn Ave

City Milwaukee State WI Zip Code 53202-3493

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

Svp Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1128.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-653**

Amount of Each Receipt this Period

141.00

Full Name (Last, First, Middle Initial)

**C. R. Michael Condrey**

Mailing Address 907 Williamson Dr

City Raleigh State NC Zip Code 27608-2307

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-10**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

490.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. R. Michael Condrey**

Mailing Address 907 Williamson Dr

City

Raleigh

State

NC

Zip Code

27608-2307

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-10**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Tait Cruse**

Mailing Address 2961 Belclaire Dr

City

Frisco

State

TX

Zip Code

75034-5969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-40**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Tait Cruse**

Mailing Address 2961 Belclaire Dr

City

Frisco

State

TX

Zip Code

75034-5969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-40**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

624.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. Brian R. Cunningham**

Mailing Address 6251 S Billings Way

City

Centennial

State

CO

Zip Code

80111-6009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-32

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Brian R. Cunningham**

Mailing Address 6251 S Billings Way

City

Centennial

State

CO

Zip Code

80111-6009

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-32

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Jefferson V. De Angelis**

Mailing Address 4449 W Donges Bay Rd

City

Mequon

State

WI

Zip Code

53092-4883

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

President Msa

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041219752-563

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

308.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jefferson V. De Angelis**

Mailing Address 4449 W Donges Bay Rd

City State Zip Code  
 Mequon WI 53092-4883

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

President Msa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

**Transaction ID : 201204261985-560**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Lew D. Derrickson**

Mailing Address 5799 Sunset Ln

City State Zip Code  
 Indianapolis IN 46228-1447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2012

**Transaction ID : 2012041611425-8**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Lew D. Derrickson**

Mailing Address 5799 Sunset Ln

City State Zip Code  
 Indianapolis IN 46228-1447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

**Transaction ID : 2012043019752-8**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

624.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Paul Dodd**

Mailing Address 7078 E Genesee St

City State Zip Code  
Fayetteville NY 13066-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-37**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Paul Dodd**

Mailing Address 7078 E Genesee St

City State Zip Code  
Fayetteville NY 13066-1123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-37**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**c. Mark G. Doll**

Mailing Address 8420 N Pelican Ln

City State Zip Code  
River Hills WI 53217-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

EVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-834**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

624.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Mark G. Doll**

Mailing Address 8420 N Pelican Ln

City

River Hills

State

WI

Zip Code

53217-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP & CIO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-830**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Steven Dugal**

Mailing Address 9 Falcon Dr

City

Mandeville

State

LA

Zip Code

70471-2952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-38**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Steven Dugal**

Mailing Address 9 Falcon Dr

City

Mandeville

State

LA

Zip Code

70471-2952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-38**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

624.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John E. Dunn**

Mailing Address N71W31034 Lower Club Cir W

City Hartland State WI Zip Code 53029-8716

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

VP & Ipas Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-615**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. John E. Dunn**

Mailing Address N71W31034 Lower Club Cir W

City Hartland State WI Zip Code 53029-8716

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

VP & Ipas Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-612**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. James R. Effner Jr.**

Mailing Address 2520 Hanford Ln

City Aurora State IL Zip Code 60502-6969

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-42**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. James R. Effner Jr.**

Mailing Address 2520 Hanford Ln

City State Zip Code  
Aurora IL 60502-6969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-42**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Ralph David Ells**

Mailing Address 9927 N Valley Hill D

City State Zip Code  
Mequon WI 53092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-870**

Amount of Each Receipt this Period

38.00

Full Name (Last, First, Middle Initial)

**C. Ralph David Ells**

Mailing Address 9927 N Valley Hill D

City State Zip Code  
Mequon WI 53092

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-866**

Amount of Each Receipt this Period

38.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

226.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Keith A. Erhard**

Mailing Address 4807 Timberwood Ct

City State Zip Code  
 West Des Moines IA 50265-5447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-26**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Keith A. Erhard**

Mailing Address 4807 Timberwood Ct

City State Zip Code  
 West Des Moines IA 50265-5447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-26**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. John C. Ertz**

Mailing Address 18235 Shaker Blvd

City State Zip Code  
 Shaker Heights OH 44120-1754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-25**

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

154.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John C. Ertz**

Mailing Address 18235 Shaker Blvd

City State Zip Code  
Shaker Heights OH 44120-1754

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-25**

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**B. Christina H. Fiasca**

Mailing Address 9230 N Fairway Dr

City State Zip Code  
Bayside WI 53217-1317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

Svp Agency Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-894**

Amount of Each Receipt this Period

102.00

Full Name (Last, First, Middle Initial)

**c. Christina H. Fiasca**

Mailing Address 9230 N Fairway Dr

City State Zip Code  
Bayside WI 53217-1317

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

Svp Agency Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

816.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-890**

Amount of Each Receipt this Period

102.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

274.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John E. Fobes II**

Mailing Address 1638 Del Dayo Dr

City

Carmichael

State

CA

Zip Code

95608-6052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-29**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. John E. Fobes II**

Mailing Address 1638 Del Dayo Dr

City

Carmichael

State

CA

Zip Code

95608-6052

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-29**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Lee M. Fortenberry**

Mailing Address 207 Brook Meadow Dr

City

Mechanicsburg

State

PA

Zip Code

17050-3139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-52**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

458.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Lee M. Fortenberry**

Mailing Address 207 Brook Meadow Dr

City

Mechanicsburg

State

PA

Zip Code

17050-3139

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-52**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Lance P. Franczyk**

Mailing Address 2224 E 24th St

City

Tulsa

State

OK

Zip Code

74114-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-54**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Lance P. Franczyk**

Mailing Address 2224 E 24th St

City

Tulsa

State

OK

Zip Code

74114-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-54**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

192.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Robert T. Frieling**

Mailing Address 5 Gennaro Cir

City

Wayland

State

MA

Zip Code

01778-4436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-24**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Robert T. Frieling**

Mailing Address 5 Gennaro Cir

City

Wayland

State

MA

Zip Code

01778-4436

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-24**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Sheila M. Gavin**

Mailing Address 5735 N Crestwood Blvd

City

Glendale

State

WI

Zip Code

53209-4309

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Ast Gn Cnl & Ast Sec/Ins

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-1014**

Amount of Each Receipt this Period

27.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

277.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy J. Gerend**

Mailing Address 5421 N Idlewild Ave

City

Whitefish Bay

State

WI

Zip Code

53217-5331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Compliance/Bp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-608**

Amount of Each Receipt this Period

64.00

Full Name (Last, First, Middle Initial)

**B. Timothy J. Gerend**

Mailing Address 5421 N Idlewild Ave

City

Whitefish Bay

State

WI

Zip Code

53217-5331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Compliance/Bp

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-605**

Amount of Each Receipt this Period

64.00

Full Name (Last, First, Middle Initial)

**C. Mitchell B. Glover**

Mailing Address 6700 Old Darby Trl NE

City

Ada

State

MI

Zip Code

49301-8360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-22**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

336.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Mitchell B. Glover**

Mailing Address 6700 Old Darby Trl NE

City State Zip Code  
 Ada MI 49301-8360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-22**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Kimberley Goode**

Mailing Address 2485 W Fairy Chasm Rd

City State Zip Code  
 River Hills WI 53217-1536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-555**

Amount of Each Receipt this Period

63.00

Full Name (Last, First, Middle Initial)

**C. Kimberley Goode**

Mailing Address 2485 W Fairy Chasm Rd

City State Zip Code  
 River Hills WI 53217-1536

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-552**

Amount of Each Receipt this Period

63.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

334.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Patrick K. Gores**

Mailing Address 2702 28th Ave S

City State Zip Code  
 Fargo ND 58103-5045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-14**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Patrick K. Gores**

Mailing Address 2702 28th Ave S

City State Zip Code  
 Fargo ND 58103-5045

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-14**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Tom Goris Jr.**

Mailing Address 8042 Cheverny Dr

City State Zip Code  
 Mequon WI 53097-2532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-35**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Tom Goris Jr.**

Mailing Address 8042 Cheverny Dr

City

Mequon

State

WI

Zip Code

53097-2532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-35**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. John M. Grogan**

Mailing Address 7860 N Club Cir

City

Fox Point

State

WI

Zip Code

53217-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Fin Plng & Prod Deliv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-993**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**c. John M. Grogan**

Mailing Address 7860 N Club Cir

City

Fox Point

State

WI

Zip Code

53217-2939

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Fin Plng & Prod Deliv

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-989**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

325.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas C. Guay**

Mailing Address W73N377 Mulberry Ave

City

Cedarburg

State

WI

Zip Code

53012-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP-New Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-628**

Amount of Each Receipt this Period

68.00

Full Name (Last, First, Middle Initial)

**B. Thomas C. Guay**

Mailing Address W73N377 Mulberry Ave

City

Cedarburg

State

WI

Zip Code

53012-2648

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP-New Business

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

544.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-625**

Amount of Each Receipt this Period

68.00

Full Name (Last, First, Middle Initial)

**C. Stephen T. Guinan**

Mailing Address 126 Waverly Cir

City

Phoenixville

State

PA

Zip Code

19460-2500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-49**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

178.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Stephen T. Guinan**

Mailing Address 126 Waverly Cir

City

Phoenixville

State

PA

Zip Code

19460-2500

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-49

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Kevin J. Hassan**

Mailing Address 804 Montparnasse Pl

City

Newtown Sq

State

PA

Zip Code

19073-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-23

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Kevin J. Hassan**

Mailing Address 804 Montparnasse Pl

City

Newtown Sq

State

PA

Zip Code

19073-2623

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-23

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

292.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 93

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Mark J. Heurung**

Mailing Address 18621 Saint Mellion Pl

City State Zip Code  
Eden Prairie MN 55347-3484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-48**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Mark J. Heurung**

Mailing Address 18621 Saint Mellion Pl

City State Zip Code  
Eden Prairie MN 55347-3484

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-48**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Gary M. Hewitt**

Mailing Address 2045 Elm Tree Rd

City State Zip Code  
Elm Grove WI 53122-1117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Treas & Inv Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-889**

Amount of Each Receipt this Period

78.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

494.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. Gary M. Hewitt**

Mailing Address 2045 Elm Tree Rd

City State Zip Code  
 Elm Grove WI 53122-1117

FEC ID number of contributing federal political committee.

C

Name of Employer

NML

Occupation

VP Treas &amp; Inv Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : 201204261985-885

Amount of Each Receipt this Period

78.00

Full Name (Last, First, Middle Initial)

**B. Steve H. Holter**

Mailing Address 11390 N Creekside Ct

City State Zip Code  
 Mequon WI 53092-4377

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

Transaction ID : 2012041611425-56

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Steve H. Holter**

Mailing Address 11390 N Creekside Ct

City State Zip Code  
 Mequon WI 53092-4377

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : 2012043019752-56

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

494.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Harry P. Hoopis**

Mailing Address 1133 Elm Tree Rd

City

Lake Forest

State

IL

Zip Code

60045-1413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-1**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Harry P. Hoopis**

Mailing Address 1133 Elm Tree Rd

City

Lake Forest

State

IL

Zip Code

60045-1413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-1**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Brian J. Hubbell**

Mailing Address 1701 E Westminster Ln

City

Spokane

State

WA

Zip Code

99223-6712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-11**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

466.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Brian J. Hubbell**

Mailing Address 1701 E Westminster Ln

City State Zip Code  
 Spokane WA 99223-6712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-11**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Scott Iodice**

Mailing Address 1930 Old Court Rd

City State Zip Code  
 Ruxton MD 21204-1849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-28**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Scott Iodice**

Mailing Address 1930 Old Court Rd

City State Zip Code  
 Ruxton MD 21204-1849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-28**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Shawn F. Kelley**

Mailing Address 16 Vintage Walk

City State Zip Code  
 Montgomery OH 45249-2101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-67**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Shawn F. Kelley**

Mailing Address 16 Vintage Walk

City State Zip Code  
 Montgomery OH 45249-2101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-67**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. John C. Kelly**

Mailing Address 5806 N Kent Ave

City State Zip Code  
 Whitefish Bay WI 53217-4612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-601**

Amount of Each Receipt this Period

61.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

311.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John C. Kelly**

Mailing Address 5806 N Kent Ave

City

Whitefish Bay

State

WI

Zip Code

53217-4612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP & Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-598**

Amount of Each Receipt this Period

61.00

Full Name (Last, First, Middle Initial)

**B. Troy B. Kemelgor**

Mailing Address 8930 Dunn Ct

City

Dublin

State

OH

Zip Code

43017-8880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-64**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**c. Troy B. Kemelgor**

Mailing Address 8930 Dunn Ct

City

Dublin

State

OH

Zip Code

43017-8880

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-64**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

145.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. William S. Koch**

Mailing Address 4645 Swilcan Bridge Ln S

City

Jacksonville

State

FL

Zip Code

32224-5621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-19**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. William S. Koch**

Mailing Address 4645 Swilcan Bridge Ln S

City

Jacksonville

State

FL

Zip Code

32224-5621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-19**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. John L. Kordsmeier**

Mailing Address 2522 W Daphne Rd

City

Glendale

State

WI

Zip Code

53209-3352

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Strat Phil & Comm Rel

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

632.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-1022**

Amount of Each Receipt this Period

79.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

329.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John L. Kordsmeier**

Mailing Address 2522 W Daphne Rd

City

Glendale

State

WI

Zip Code

53209-3352

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Strat Phil & Comm Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-1018**

Amount of Each Receipt this Period

79.00

Full Name (Last, First, Middle Initial)

**B. Steven H. Kosnick**

Mailing Address 5799 Windsona Cir

City

Fitchburg

State

WI

Zip Code

53711-5839

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-13**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Steven H. Kosnick**

Mailing Address 5799 Windsona Cir

City

Fitchburg

State

WI

Zip Code

53711-5839

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-13**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

163.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Carol L. Kracht**

Mailing Address 449 E Cedar Ln

City

Thiensville

State

WI

Zip Code

53092-6102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Dep Gc/Sec & Board Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-953**

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

**B. Carol L. Kracht**

Mailing Address 449 E Cedar Ln

City

Thiensville

State

WI

Zip Code

53092-6102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Dep Gc/Sec & Board Rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-949**

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

**C. M. Kevin Lawhon**

Mailing Address 6952 Burnt Sienna Cir

City

Naples

State

FL

Zip Code

34109-7826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-59**

Amount of Each Receipt this Period

83.33

**SUBTOTAL** of Receipts This Page (optional)..... ►

151.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. M. Kevin Lawhon**

Mailing Address 6952 Burnt Sienna Cir

City  
Naples

State Zip Code  
FL 34109-7826

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-59**

Amount of Each Receipt this Period

83.33

Full Name (Last, First, Middle Initial)

**B. Werner Loots**

Mailing Address 2664 N Summit Ave

City  
Milwaukee

State Zip Code  
WI 53211-3849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

Dir Strat Intel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-588**

Amount of Each Receipt this Period

33.00

Full Name (Last, First, Middle Initial)

**C. Werner Loots**

Mailing Address 2664 N Summit Ave

City  
Milwaukee

State Zip Code  
WI 53211-3849

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

Dir Strat Intel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-585**

Amount of Each Receipt this Period

33.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

149.33

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Robert D. Lowrey**

Mailing Address 1108 W Goldthread Cir

City

Sioux Falls

State

SD

Zip Code

57108-2824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-18**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Robert D. Lowrey**

Mailing Address 1108 W Goldthread Cir

City

Sioux Falls

State

SD

Zip Code

57108-2824

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-18**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey J. Lueken**

Mailing Address 1213 E Goodrich Ln

City

Fox Point

State

WI

Zip Code

53217-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Securities

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1224.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-881**

Amount of Each Receipt this Period

153.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

237.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffrey J. Lueken**

Mailing Address 1213 E Goodrich Ln

City

Fox Point

State

WI

Zip Code

53217-2946

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Securities

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1224.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-877**

Amount of Each Receipt this Period

153.00

Full Name (Last, First, Middle Initial)

**B. Cory A. Mahaffey**

Mailing Address 13764 Knaus Rd

City

Lake Oswego

State

OR

Zip Code

97034-2175

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-66**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Cory A. Mahaffey**

Mailing Address 13764 Knaus Rd

City

Lake Oswego

State

OR

Zip Code

97034-2175

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-66**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

237.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jean M. Maier**

Mailing Address 9642 N Lamplighter Ln

City

Mequon

State

WI

Zip Code

53092-5321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ent Ops & Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-516**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Jean M. Maier**

Mailing Address 9642 N Lamplighter Ln

City

Mequon

State

WI

Zip Code

53092-5321

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ent Ops & Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-513**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Raymond J. Manista**

Mailing Address 7236 N Crossway Rd

City

Fox Point

State

WI

Zip Code

53217-3519

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Gen Cnsl & Sec

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-551**

Amount of Each Receipt this Period

96.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

512.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Raymond J. Manista**

Mailing Address 7236 N Crossway Rd

City

Fox Point

State

WI

Zip Code

53217-3519

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Gen Cnsl & Sec

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

768.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-548**

Amount of Each Receipt this Period

96.00

Full Name (Last, First, Middle Initial)

**B. David C. Mc Avoy**

Mailing Address 11 Mountview Rd

City

Wellesley

State

MA

Zip Code

02481-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-7**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**c. David C. Mc Avoy**

Mailing Address 11 Mountview Rd

City

Wellesley

State

MA

Zip Code

02481-2757

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-7**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

512.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Roger M. Mc Queen**

Mailing Address 5820 Twin Creek Rd

City State Zip Code  
Salt Lake Cty UT 84108-3605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-5**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Roger M. Mc Queen**

Mailing Address 5820 Twin Creek Rd

City State Zip Code  
Salt Lake Cty UT 84108-3605

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-5**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Brian W. McClure**

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code  
Champaign IL 61822-3349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-69**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Brian W. McClure**

Mailing Address 1402 Wyndemere Point Dr

City State Zip Code  
Champaign IL 61822-3349

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-69**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Mark J. McLennon**

Mailing Address 2571 N 86th St

City State Zip Code  
Wauwatosa WI 53226-1921

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Invest Advisory Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-586**

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

**C. Mark J. McLennon**

Mailing Address 2571 N 86th St

City State Zip Code  
Wauwatosa WI 53226-1921

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Invest Advisory Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

272.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-583**

Amount of Each Receipt this Period

34.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

110.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John W. McTigue**

Mailing Address 205 E 4th St

City

Hinsdale

State

IL

Zip Code

60521-4603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-12**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. John W. McTigue**

Mailing Address 205 E 4th St

City

Hinsdale

State

IL

Zip Code

60521-4603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-12**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**c. Joseph F. Meier**

Mailing Address 208 Long Acres Ln

City

Oviedo

State

FL

Zip Code

32765-7843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-16**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

458.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph F. Meier**

Mailing Address 208 Long Acres Ln

City

Oviedo

State

FL

Zip Code

32765-7843

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-16**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Robert G. Meilander**

Mailing Address 6900 N Glen Shore Dr

City

Glendale

State

WI

Zip Code

53209-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP-Corporate Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-543**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**c. Robert G. Meilander**

Mailing Address 6900 N Glen Shore Dr

City

Glendale

State

WI

Zip Code

53209-2819

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP-Corporate Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-540**

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

102.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Ben Miller**

Mailing Address 2211 E Camelback Rd  
Unit 905

City State Zip Code  
Phoenix AZ 85016-9057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-63**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Ben Miller**

Mailing Address 2211 E Camelback Rd  
Unit 905

City State Zip Code  
Phoenix AZ 85016-9057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-63**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Kevin E. Miller**

Mailing Address 214 Schenley Rd

City State Zip Code  
Pittsburgh PA 15217-1171

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-47**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Kevin E. Miller**

Mailing Address 214 Schenley Rd

City State Zip Code  
Pittsburgh PA 15217-1171

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-47**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. James J. Nemec**

Mailing Address 22 Maple Ave

City State Zip Code  
Larchmont NY 10538-4041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-70**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. James J. Nemec**

Mailing Address 22 Maple Ave

City State Zip Code  
Larchmont NY 10538-4041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-70**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

624.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. William H. Norton**

Mailing Address 10145 Wavell Rd

City  
Fairfax

State  
VA

Zip Code  
22032-2337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041219752-514

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. William H. Norton**

Mailing Address 10145 Wavell Rd

City  
Fairfax

State  
VA

Zip Code  
22032-2337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 201204261985-511

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Gregory C. Oberland**

Mailing Address 4746 N Cumberland Blvd

City  
Whitefish Bay

State  
WI

Zip Code  
53211-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ins & Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041219752-572

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

308.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Gregory C. Oberland**

Mailing Address 4746 N Cumberland Blvd

City

Whitefish Bay

State

WI

Zip Code

53211-1147

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP Ins & Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-569**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Eric S. Olson**

Mailing Address 127 Fairmount Rd

City

Ridgewood

State

NJ

Zip Code

07450-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-53**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Eric S. Olson**

Mailing Address 127 Fairmount Rd

City

Ridgewood

State

NJ

Zip Code

07450-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-53**

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

292.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Kathleen A. Oman**

Mailing Address S63W16495 College Ave

City

Muskego

State

WI

Zip Code

53150-8303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP IT Relationship Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-722**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kathleen A. Oman**

Mailing Address S63W16495 College Ave

City

Muskego

State

WI

Zip Code

53150-8303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP IT Relationship Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-719**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**c. Christen L. Partleton**

Mailing Address 4832 N Shoreland Ave

City

Whitefish Bay

State

WI

Zip Code

53217-5821

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Facility Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-836**

Amount of Each Receipt this Period

26.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

126.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Gary A. Poliner**

Mailing Address 825 N Prospect Ave  
# U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Pres & Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-520**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Gary A. Poliner**

Mailing Address 825 N Prospect Ave  
# U

City Milwaukee State WI Zip Code 53202-3979

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Pres & Chief Risk Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-517**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**c. Charles R. Pruett**

Mailing Address 224 Ensworth Pl

City Nashville State TN Zip Code 37205-1922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-57**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

541.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Charles R. Pruett**

Mailing Address 224 Ensworth Pl

City

Nashville

State

TN

Zip Code

37205-1922

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-57

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Craig L. Quinlan**

Mailing Address 2302 Court North Dr

City

Melville

State

NY

Zip Code

11747-8122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-31

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**c. Craig L. Quinlan**

Mailing Address 2302 Court North Dr

City

Melville

State

NY

Zip Code

11747-8122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-31

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

209.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Steven M. Radke**

Mailing Address 9600 N Crestwood Ct

City

Mequon

State

WI

Zip Code

53092-5355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-806**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**B. Steven M. Radke**

Mailing Address 9600 N Crestwood Ct

City

Mequon

State

WI

Zip Code

53092-5355

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Govt Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-803**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Jeff D. Reeter**

Mailing Address 7 Williamsburg Ln

City

Houston

State

TX

Zip Code

77024-5144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-68**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jeff D. Reeter**

Mailing Address 7 Williamsburg Ln

City

Houston

State

TX

Zip Code

77024-5144

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-68**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. David R. Remstad**

Mailing Address 2634 N Lake Dr

City

Milwaukee

State

WI

Zip Code

53211-3837

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Actuary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

560.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-727**

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. David R. Remstad**

Mailing Address 2634 N Lake Dr

City

Milwaukee

State

WI

Zip Code

53211-3837

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Actuary

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

560.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-724**

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

240.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Adam T. Rhoades**

Mailing Address 2038 Rosemont Pl

City

Vestavia

State

AL

Zip Code

35243-1767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-60**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Adam T. Rhoades**

Mailing Address 2038 Rosemont Pl

City

Vestavia

State

AL

Zip Code

35243-1767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-60**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Marcia Rimai**

Mailing Address 4100 N Lake Dr

City

Shorewood

State

WI

Zip Code

53211-1719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP & Chief Admin Officer

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-612**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Marcia Rimai**

Mailing Address 4100 N Lake Dr

City State Zip Code  
Shorewood WI 53211-1719

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

EVP & Chief Admin Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-609**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. J. Daniel Rivers**

Mailing Address 3601 River Ridge Cv

City State Zip Code  
Prospect KY 40059-8038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-30**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. J. Daniel Rivers**

Mailing Address 3601 River Ridge Cv

City State Zip Code  
Prospect KY 40059-8038

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-30**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

624.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Bethany M. Rodenhuis**

Mailing Address 3900 N Lake Dr

City

Shorewood

State

WI

Zip Code

53211-2448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Corp Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-614**

Amount of Each Receipt this Period

74.00

Full Name (Last, First, Middle Initial)

**B. Bethany M. Rodenhuis**

Mailing Address 3900 N Lake Dr

City

Shorewood

State

WI

Zip Code

53211-2448

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Corp Plng

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

592.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-611**

Amount of Each Receipt this Period

74.00

Full Name (Last, First, Middle Initial)

**C. Matt Russo**

Mailing Address 139 Deep Valley Rd

City

New Canaan

State

CT

Zip Code

06840-2804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-62**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

356.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Matt Russo**

Mailing Address 139 Deep Valley Rd

City

New Canaan

State

CT

Zip Code

06840-2804

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-62**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. R. Philip Sarnecki**

Mailing Address 16004 King St

City

Overland Park

State

KS

Zip Code

66062-7508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-43**

Amount of Each Receipt this Period

104.17

Full Name (Last, First, Middle Initial)

**C. R. Philip Sarnecki**

Mailing Address 16004 King St

City

Overland Park

State

KS

Zip Code

66062-7508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.36

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-43**

Amount of Each Receipt this Period

104.17

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

416.34

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Joseph M. Savino**

Mailing Address 8 Benedek Rd

City  
Princeton

State  
NJ

Zip Code  
08540-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-3**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Joseph M. Savino**

Mailing Address 8 Benedek Rd

City  
Princeton

State  
NJ

Zip Code  
08540-2227

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-3**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Timothy G. Schaefer**

Mailing Address 1013 E Lexington Blvd

City  
Whitefish Bay

State  
WI

Zip Code  
53217-5381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Info Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-839**

Amount of Each Receipt this Period

108.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

524.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy G. Schaefer**

Mailing Address 1013 E Lexington Blvd

City State Zip Code  
 Whitefish Bay WI 53217-5381

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp & Chief Info Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

**Transaction ID : 201204261985-835**

Amount of Each Receipt this Period

108.00

Full Name (Last, First, Middle Initial)

**B. John E. Schlfske**

Mailing Address 1500 Greenway Ter

City State Zip Code  
 Elm Grove WI 53122-1611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 15 2012

**Transaction ID : 2012041219752-747**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. John E. Schlfske**

Mailing Address 1500 Greenway Ter

City State Zip Code  
 Elm Grove WI 53122-1611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 30 2012

**Transaction ID : 201204261985-744**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

524.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Kathleen H. Schluter**

Mailing Address 5057 N Palisades Rd

City

Whitefish Bay

State

WI

Zip Code

53217-5756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP & Tax Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-749**

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**B. Kathleen H. Schluter**

Mailing Address 5057 N Palisades Rd

City

Whitefish Bay

State

WI

Zip Code

53217-5756

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP & Tax Cnsl

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-746**

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**C. Calvin R. Schmidt**

Mailing Address W205 Allen Rd

City

Oconomowoc

State

WI

Zip Code

53066-9048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Int Cust Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-775**

Amount of Each Receipt this Period

78.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

142.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Calvin R. Schmidt**

Mailing Address W205 Allen Rd

City

Oconomowoc

State

WI

Zip Code

53066-9048

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Int Cust Ops

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-772**

Amount of Each Receipt this Period

78.00

Full Name (Last, First, Middle Initial)

**B. Rodd Schneider**

Mailing Address 1415 E Fairy Chasm Rd

City

Bayside

State

WI

Zip Code

53217-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Litig & Dist Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-511**

Amount of Each Receipt this Period

31.00

Full Name (Last, First, Middle Initial)

**C. Rodd Schneider**

Mailing Address 1415 E Fairy Chasm Rd

City

Bayside

State

WI

Zip Code

53217-1433

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Litig & Dist Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-508**

Amount of Each Receipt this Period

31.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

140.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Todd M. Schoon**

Mailing Address 923 E Kilbourn Ave

# U

City

Milwaukee

State

WI

Zip Code

53202-3493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Sr VP Agencies

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-1047**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Todd M. Schoon**

Mailing Address 923 E Kilbourn Ave

# U

City

Milwaukee

State

WI

Zip Code

53202-3493

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Sr VP Agencies

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-1043**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. Brad P. Seitzinger**

Mailing Address 1672 Chieftan Cir

City

Oxford

State

MI

Zip Code

48371-6095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-46**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

516.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Brad P. Seitzinger**

Mailing Address 1672 Chieftan Cir

City  
Oxford

State  
MI

Zip Code  
48371-6095

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-46**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. David W. Simbro**

Mailing Address 311 E Erie St  
Unit 4

City

Milwaukee

State

WI

Zip Code

53202-6040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Life & Ann Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-1037**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. David W. Simbro**

Mailing Address 311 E Erie St  
Unit 4

City

Milwaukee

State

WI

Zip Code

53202-6040

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Svp Life & Ann Products

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-1033**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Paul W. Skalecki**

Mailing Address W69N463 Fox Pointe A

City State Zip Code  
Cedarburg WI 53012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Uw Standards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-862**

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**B. Paul W. Skalecki**

Mailing Address W69N463 Fox Pointe A

City State Zip Code  
Cedarburg WI 53012

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Uw Standards

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-858**

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

**C. Steve P. Sperka**

Mailing Address S67W17735 Copper Oaks Ct

City State Zip Code  
Muskego WI 53150-7503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Ltc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-780**

Amount of Each Receipt this Period

55.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

119.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Steve P. Sperka**

Mailing Address S67W17735 Copper Oaks Ct

City

Muskego

State

WI

Zip Code

53150-7503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Ltc

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 201204261985-777

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**B. Robert L. Spinks**

Mailing Address 305 Waterbury Cv

City

Jackson

State

MS

Zip Code

39232-8692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-6

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**c. Robert L. Spinks**

Mailing Address 305 Waterbury Cv

City

Jackson

State

MS

Zip Code

39232-8692

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-6

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

139.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Paul J. Steffen**

Mailing Address 10502 N Stone Creek Dr

City State Zip Code  
 Mequon WI 53092-5463

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Agencies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-512**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Paul J. Steffen**

Mailing Address 10502 N Stone Creek Dr

City State Zip Code  
 Mequon WI 53092-5463

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Agencies

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-509**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. David G. Stoeffel**

Mailing Address 6311 N Lake Dr

City State Zip Code  
 Whitefish Bay WI 53217-4343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Fppd

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-864**

Amount of Each Receipt this Period

36.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

136.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. David G. Stoeffel**

Mailing Address 6311 N Lake Dr

City State Zip Code  
 Whitefish Bay WI 53217-4343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Fppd

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-860**

Amount of Each Receipt this Period

36.00

Full Name (Last, First, Middle Initial)

**B. Peter F. Striano III**

Mailing Address 11050 NW 78th PI

City State Zip Code  
 Parkland FL 33076-4723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-58**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**C. Peter F. Striano III**

Mailing Address 11050 NW 78th PI

City State Zip Code  
 Parkland FL 33076-4723

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-58**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

286.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Rachel L. Taknint**

Mailing Address 2804 E Newberry Blvd

City

Milwaukee

State

WI

Zip Code

53211-3427

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Info Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-807**

Amount of Each Receipt this Period

27.00

Full Name (Last, First, Middle Initial)

**B. Joe P. Teague**

Mailing Address 17002 Abastos De Avila

City

Tampa

State

FL

Zip Code

33613-5214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-9**

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

**C. Joe P. Teague**

Mailing Address 17002 Abastos De Avila

City

Tampa

State

FL

Zip Code

33613-5214

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-9**

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

167.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Michael F. Tews**

Mailing Address 609 S 249th Cir

City

Waterloo

State

NE

Zip Code

68069-4432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-27**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Michael F. Tews**

Mailing Address 609 S 249th Cir

City

Waterloo

State

NE

Zip Code

68069-4432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-27**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Scott P. Theodore**

Mailing Address 12505 Ventana Mesa Cir

City

Castle Pines

State

CO

Zip Code

80108-9148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-39**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

292.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. Scott P. Theodore**

Mailing Address 12505 Ventana Mesa Cir

City State Zip Code  
 Castle Pines CO 80108-9148

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : 2012043019752-39

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. Alex J. Tronco**

Mailing Address 11 Stoneridge Dr

City State Zip Code  
 Loudonville NY 12211-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

Transaction ID : 2012041611425-65

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Alex J. Tronco**

Mailing Address 11 Stoneridge Dr

City State Zip Code  
 Loudonville NY 12211-2625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : 2012043019752-65

Amount of Each Receipt this Period

42.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

292.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Leo C. Tucker**

Mailing Address 605 Potomac River Rd

City

State

Zip Code

Mc Lean

VA

22102-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-55**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Leo C. Tucker**

Mailing Address 605 Potomac River Rd

City

State

Zip Code

Mc Lean

VA

22102-1402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-55**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C. Robert J. Waltos Jr.**

Mailing Address 7 Castaways N

City

State

Zip Code

Newport Beach

CA

92660-8403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041611425-21**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

250.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Robert J. Waltos Jr.**

Mailing Address 7 Castaways N

City

Newport Beach

State

CA

Zip Code

92660-8403

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 2012043019752-21**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. P. Andrew Ware**

Mailing Address 7900 N Berwyn Ave

City

Glendale

State

WI

Zip Code

53209-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-494**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. P. Andrew Ware**

Mailing Address 7900 N Berwyn Ave

City

Glendale

State

WI

Zip Code

53209-1810

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-492**

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Alison F. Watson**

Mailing Address 420 Independence Ave SE

City

Washington

State

DC

Zip Code

20003-1046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Dir Fed Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041219752-1019**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Alison F. Watson**

Mailing Address 420 Independence Ave SE

City

Washington

State

DC

Zip Code

20003-1046

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Dir Fed Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-1015**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey B. Williams**

Mailing Address 2004 N 72nd St

City

Wauwatosa

State

WI

Zip Code

53213-1828

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Corp Risk Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 201204261985-558**

Amount of Each Receipt this Period

28.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

128.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. James R. Worrell**

Mailing Address 2218 Hopedale Ave

City

Charlotte

State

NC

Zip Code

28207-2130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Richard Worrell LLC

Occupation

Senior Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-2**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B. James R. Worrell**

Mailing Address 2218 Hopedale Ave

City

Charlotte

State

NC

Zip Code

28207-2130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Richard Worrell LLC

Occupation

Senior Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

04 / 30 / 2012

**Transaction ID : 2012043019752-2**

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**C. John William Wright II**

Mailing Address 4463 Jett Rd NW

City

Atlanta

State

GA

Zip Code

30327-3563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

04 / 15 / 2012

**Transaction ID : 2012041611425-45**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

516.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. John William Wright II**

Mailing Address 4463 Jett Rd NW

City State Zip Code  
 Atlanta GA 30327-3563

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 2012043019752-45**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Conrad C. York**

Mailing Address 1313 N Franklin Pl

City State Zip Code  
 Milwaukee WI 53202-2980

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-753**

Amount of Each Receipt this Period

76.00

Full Name (Last, First, Middle Initial)

**c. Conrad C. York**

Mailing Address 1313 N Franklin Pl

City State Zip Code  
 Milwaukee WI 53202-2980

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

NML

VP Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

608.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-750**

Amount of Each Receipt this Period

76.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

252.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A. T. Scott Zach**

Mailing Address 6630 Country Creek Ln

City

Cedar Rapids

State

IA

Zip Code

52403-7023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041611425-61

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. T. Scott Zach**

Mailing Address 6630 Country Creek Ln

City

Cedar Rapids

State

IA

Zip Code

52403-7023

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

04 / 30 / 2012

Transaction ID : 2012043019752-61

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**C. Thomas D. Zale**

Mailing Address 2818 E Menlo Blvd

City

Shorewood

State

WI

Zip Code

53211-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

04 / 15 / 2012

Transaction ID : 2012041219752-781

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

134.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Thomas D. Zale**

Mailing Address 2818 E Menlo Blvd

City

Shorewood

State

WI

Zip Code

53211-2652

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-778**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Rick T. Zehner**

Mailing Address 203 W Ravine Baye Rd

City

Bayside

State

WI

Zip Code

53217-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Special Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 15 / 2012

**Transaction ID : 2012041219752-954**

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

**C. Rick T. Zehner**

Mailing Address 203 W Ravine Baye Rd

City

Bayside

State

WI

Zip Code

53217-1334

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Special Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 30 / 2012

**Transaction ID : 201204261985-950**

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

120.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Todd O. Zinkgraf**

Mailing Address 118 Ferris Dr

City State Zip Code  
 North Prairie WI 53153-9455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Ent Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041219752-979**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Todd O. Zinkgraf**

Mailing Address 118 Ferris Dr

City State Zip Code  
 North Prairie WI 53153-9455

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NML

Occupation

VP Ent Solutions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

**Transaction ID : 201204261985-975**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Jeffrey Zuzolo**

Mailing Address 104 Wildwood Dr

City State Zip Code  
 Avon CT 06001-4413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 15 / 2012

**Transaction ID : 2012041611425-20**

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

308.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 93  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

**A.** Jeffrey Zuzolo

Mailing Address 104 Wildwood Dr

City State Zip Code  
 Avon CT 06001-4413

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

General Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 30 / 2012

Transaction ID : 2012043019752-20

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

208.00

24630.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 93

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. US Bank**

Mailing Address 777 E.Wisconsin Ave.

City Milwaukee State WI Zip Code 53202

Purpose of Disbursement  
Service Charge

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 13 2012**Transaction ID : 76B3647D6F3E1D9820F**

Amount of Each Disbursement this Period

250.12

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

250.12

250.12



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 93

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Allyson Schwartz for Congress**

Mailing Address PO Box 2232

City	State	Zip Code
Jenkintown	PA	19046

Purpose of Disbursement  
2012 General

011

Candidate Name

**Allyson Y. Schwartz**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	17	/	2012

**Transaction ID : F80D1308B265561BB10**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. BADGERPAC**

Mailing Address PO Box 70980

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement  
2012 Contribution

011

Candidate Name

**BADGERPAC**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼ Contribution

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	23	/	2012

**Transaction ID : 45B19F54DCF5A7FA299**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Bob Corker for Senate 2012**

Mailing Address 1910 21st Avenue South

City	State	Zip Code
Nashville	TN	37212

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Bob Corker**Category/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	12	/	2012

**Transaction ID : 760EFA05143382EE47C**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Cantor for Congress**

Mailing Address PO Box 17813

City	State	Zip Code
Richmond	VA	23226

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Eric Ivan Cantor**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: VA District: 07

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2012

**Transaction ID : BEAF4C9859AB70F6717**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Charles Boustany Jr. MD for Congress, Inc.**

Mailing Address PO Box 80126

City	State	Zip Code
Lafayette	LA	70598

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Charles W. Boustany Jr.**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 07

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	24	/	2012

**Transaction ID : 469887A426870C67E10**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Edwin Peacock for Congress**

Mailing Address 1115 East Morehead Street

City	State	Zip Code
Charlotte	NC	28204

Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Edwin B. Peacock III**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 09

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2012

**Transaction ID : 8FC117400A80324657D**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 91 OF 93

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Every Republican Is Crucial (ERICPAC)**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2012

Mailing Address 25 E Main Street  
Suite 200

City Richmond State VA Zip Code 23219

Purpose of Disbursement  
2012 Contribution

011

**Transaction ID : FD06A49D3C441608415**

Amount of Each Disbursement this Period

5000.00
---------

Candidate Name

**Every Republican Is Crucial (ERICPAC)**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Contribution

State: District:

Full Name (Last, First, Middle Initial)

**B. Jim Gerlach for Congress Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2012

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement  
2012 Primary

011

**Transaction ID : EA5901426BB1C5C6BEF**

Amount of Each Disbursement this Period

2000.00
---------

Candidate Name

**James W. Gerlach**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 06

Full Name (Last, First, Middle Initial)

**C. Jim Himes for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2012

Mailing Address 857 Post Road, #312

City Fairfield State CT Zip Code 06824

Purpose of Disbursement  
2012 Convention

011

**Transaction ID : 7C308BD3F86C5B9B898**

Amount of Each Disbursement this Period

1500.00
---------

Candidate Name

**James A. Himes**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: CT District: 04

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 92 OF 93

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Himes for Congress**

Mailing Address 857 Post Road, #312

City Fairfield	State CT	Zip Code 06824
-------------------	-------------	-------------------

Purpose of Disbursement  
2012 General

011

Candidate Name

**James A. Himes**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CT District: 04

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		05		2012

**Transaction ID : 91AE626D4F2FFF2200C**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Joe Walsh for Congress Committee, Inc.**

Mailing Address 830 W. Route 22 -Box 56

City Lake Zurich	State IL	Zip Code 60047
---------------------	-------------	-------------------

Purpose of Disbursement  
2012 General

011

Candidate Name

**Joe Walsh**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 08

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		03		2012

**Transaction ID : DB994F57C7978E6BA09**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Judy Biggert for Congress**

Mailing Address PO Box 4198

City Naperville	State IL	Zip Code 60567
--------------------	-------------	-------------------

Purpose of Disbursement  
2012 General

011

Candidate Name

**Judy Biggert**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 11

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2012

**Transaction ID : 9883968750C45981FE5**

Amount of Each Disbursement this Period

3000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**The Northwestern Mutual Life Insurance Company Federal PAC**

Full Name (Last, First, Middle Initial)

**A. Roskam for Congress Committee**

Mailing Address PO Box 713

City Wheaton	State IL	Zip Code 60187
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Purpose of Disbursement  
2012 General

011

Candidate Name

**Peter J. Roskam**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		27		2012

**Transaction ID : B2538B0E45BD7CB43C7**

Amount of Each Disbursement this Period

1000.00
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Full Name (Last, First, Middle Initial)

**B. Vern Buchanan for Congress**

Mailing Address PO Box 48928

City Sarasota	State FL	Zip Code 34230
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Purpose of Disbursement  
2012 Primary

011

Candidate Name

**Vernon Buchanan**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2012

**Transaction ID : 5CFB6C0C3DFBD58B011**

Amount of Each Disbursement this Period

500.00
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Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00

27500.00